(b) There is only one institute *i.e.* 'National Institute of Mental Health and Neuro Sciences, Bangalore' which has been conferred Deemed University status in Karnataka.

(c) The information is being collected and will be laid on the Table of the House.

AIDS control

1310. SHRIMATI SAVITA SHARDA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that Pakistan, Bangladesh, Nepal and Sri Lanka have been more successful in curbing HIV infection in comparison to India;

(b) if so, the reasons therefor;

(c) whether Government have formulated any new scheme to effectively curb the HIV infection; and

(d) if so, the details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRIMATI SUSHMA SWARAJ): (a) and (b) UN AIDS/WHO had released a report: on "AIDS epidemic update" in December 2003. As contained in chapter on "Asia and the Pacific", the report highlighted the current status of HIV/AIDS epidemic in various countries including India, Nepal, Pakistan and Bangladesh. As per this report no conclusions can be drawn that these countries have been more successful in curbing HIV infection in comparison to India. Rather, the report forecasted the potential risk of widespread epidemics in these countries.

(c) and (d) In order to prevent and control the spread of HIV/AIDS in India, Government of India has launched a comprehensive National AIDS Control Programme, currently under implementation throughout the country as a centrally sponsored scheme under following components:—

- Preventive interventions for high-risk populations through targeted interventions adopting a multi-pronged strategy including peer counselling, treatment of sexually transmitted infections and behaviour change communication.

- Preventive interventions for the general population through programmes for Blood Safety, voluntary counselling and Testing services, Prevention of Parent to Child Transmission Services, Information, Education and Communication (IEC) and awareness building among adolescents and sensitization for the AIDS Vaccine Initiative.
- Provision of low cost care and support services by providing community care services, treatment of opportunistic infection and prevention of occupational exposure.
- Collaborative efforts to promote inter-sectoral co-ordination activities including workplace interventions and public-private partnerships.
- Building technical and managerial capacities for programme implementation through Surveillance, Training, Monitoring and Evaluation, Technical resource groups, operational research and Programme Management.

Emergency wards in Hospitals

1311. SHRI SHAHID SIDDIQUI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the action taken against the doctors and hospital staff refusing admission to people brought in critical condition to the emergency wards of the hospitals; and

(b) whether there is a concrete plan to improve the condition of emergency wards of the hospitals as most of the accident victims are brought in a very critical condition?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRIMATI SUSHMA SWARAJ): (a) Based on the Supreme Court directive instructions have been issued by this Ministry to all the States/Union Territories/Central Government Hospitals/Institutions to the effect that all accident victims whose condition is morbid/serious should be admitted even if beds are not available and in no case the patient be left unattended for want of vacant beds in the emergency/casualty department.